PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

R-0004 US

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
<u></u>	CT41 OL 41140		(Column 1) (Co		(Colu	ımn 2)	i .	TYPE [OR	SMALL	ENTITY	
TOTAL CLAIMS			50	50				RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA,		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			50 minus 20= * 3					XS 9=		OR	X\$18=	540	
⊢	DEPENDENT C							X43=		O.R	X86=	86	
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	·	OR	÷290=		
* [1	the difference	e in column 1 is	less than z	ero, enter	"0" in c	olumn 2	Ŀ	TOTAL		OR	TOTAL	1396	
CLAIMS AS AMENDED - PART II									-	_	OTHER		
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		XS 9=		OR	X\$18=		
	Independent	* ENTATION OF M	Minus	DENIDENT (CL AIM	=		X43=	_	OR	X86=		
			02111 22 02	CIADEIA	·		'	+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	n 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	,	~		X\$ 9=		OR	X\$18=-		
	Incependent	- -	Minus	***		=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			+290=		
		•					Ľ	TOTAL	:	OR	TOTAL	•	
						•	. Al	ODIT. FEE		OR ,	ADDIT. FEE		
		(Column 1) CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Column		(Column 3)				_			
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Indep ndent	* NTATION OF ML	Minus	PENDENT C		= -		X43=	-	OR	X86=		
	- moi Friede	TATION OF MIC		ENDEN! (-CAIIVI			+145=		OR	+290=		
* 11	• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. •• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										·TOTAL		
	f the "Highest Nur	mber Previously Pa ber Previously Paid ber Previously Paid	id For" IN THIS	S SPACE is I	ess than	3. enter "3."	~~	DIT. FEE L	opriate box		.DDIT. FEE L ımn 1.		